

Exhibit D

NERA Insect Repellent Survey

August 22, 2019 – September 10, 2019

Thank you for your willingness to participate in our study. The responses you give to our questions are very important to us. If you don't know an answer to a question or if you don't have an opinion, please indicate this in your response. Please do not guess.

During the survey, please do not use your browser's *FORWARD* and *BACK* buttons. Instead, please always use the button below to move through the survey.

Simply click on the ">" button at the bottom of the page to begin the survey.

> >

Before continuing with this survey, please carefully read these instructions:

- Please take the survey in one session.
- While completing this survey, please do not visit any other websites or refer to any outside websites for help in answering the survey questions.
- While completing this survey, please do not open any other windows or tabs on this computer/device or any other computer/device.
- While taking this survey, please do not use any electronic devices other than the one on which you are taking this survey.
- Please do not view any other written material while taking this survey.
- Please do not ask anyone else for help in answering the survey questions.

☐ I have read the above instructions and understand them, and I will adhere to these instructions.

☐ I do not understand the above instructions, or I don't wish to agree to them.

> >

Please enter the code exactly as it appears in the image below, and then click ">" to continue.
Please note that the code is case sensitive.



> >

What type of device are you using to complete this survey?

☐ Desktop computer

☐ Laptop computer

☐ Tablet computer

☐ Mobile phone or cell phone

☐ Something else (Please specify)

> >

Are you...

☐ Male

☐ Female

> >

11%

Please select your age.

Select one...

▼

> >

In which state do you currently reside?

Select one...

▼

> >

Please enter your zip code.

> >

Do you or does anyone in your household work for any of the following?

Please select one in each row

	Yes	No	Don't Know
A company that makes or manufactures hand moisturizer or hand lotion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A company that makes or manufactures antibacterial hand gel/hand sanitizer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A company that makes or manufactures sunscreen or sun tanning lotion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
An advertising company	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A company that makes or manufactures personal insect repellent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A market research company	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In the past six months, have you taken a survey on any of the following types of products?

(Select all that apply)

- ☐ Personal insect repellent you apply to your body
- ☐ Antibacterial hand gel/hand sanitizer
- ☐ Sunscreen or sun tanning lotion
- ☐ Hand moisturizer or hand lotion
- ☐ None of these
- ☐ Don't know / Not sure

> >

Since January 1, 2011, have you purchased any of the following products?

(Select all that apply)

- ☐ Hand moisturizer or hand lotion
- ☐ Personal insect repellent you apply to your body
- ☐ Antibacterial hand gel/hand sanitizer
- ☐ Sunscreen or sun tanning lotion
- ☐ None of these
- ☐ Don't know / Not sure

> >

33%

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >

Cutter

1/17

Yes

No

Don't know / Not Sure

> >

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >



2/17

Yes

No

Don't know / Not Sure

> >

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >

EcoSMART[®]

3/17

Yes

No

Don't know / Not Sure


> >

33%

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >



4/17

Yes

No


Don't know / Not Sure

> >

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >



5/17

Yes

No

Don't know / Not Sure

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >

SAWYER®

6/17

Yes

No

Don't know / Not Sure

> >

33%

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >

Ben's
insect repellent

7/17

Yes

No

Don't know / Not Sure

> >

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >

BURT'S BEES

8/17

Yes


No

Don't know / Not Sure

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >



9/17

Yes

No

Don't know / Not Sure

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

[< Prev](#)[Next >](#)

10/17

☐ Yes☐ No☐ Don't know / Not Sure[> >](#)

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

[< Prev](#)[Next >](#)

11/17

[>>](#)

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

[< Prev](#)[Next >](#)

12/17

[> >](#)

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

[< Prev](#)[Next >](#)

13/17

[> >](#)

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >



14/17

Yes

No

Don't know / Not Sure

> >

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

[< Prev](#)[Next >](#)

15/17

[> >](#)

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >



16/17

Yes

No

Don't know / Not Sure

> >

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

Next >



17/17

Yes

No

Don't know / Not Sure

> >

Which, if any, of the following brands of personal insect repellent have you purchased since January 1, 2011?

< Prev

All done!

Click the "Continue" button to proceed.

Next >

-/-

You mentioned you have purchased **Cutter** brand personal insect repellent since January 1, 2011. Which of the following **Cutter** insect repellents have you purchased?

(Select all that apply)

< Prev

Next >



1/8

Yes

No

Don't know / Not Sure

> >

You mentioned you have purchased **Cutter** brand personal insect repellent since January 1, 2011. Which of the following **Cutter** insect repellents have you purchased?

(Select all that apply)

< Prev

Next >



2/8

Yes

No

Don't know / Not Sure

> >

You mentioned you have purchased **Cutter** brand personal insect repellent since January 1, 2011. Which of the following **Cutter** insect repellents have you purchased?

(Select all that apply)

< Prev

Next >



3/8

Yes

No

Don't know / Not Sure

> >

You mentioned you have purchased **Cutter** brand personal insect repellent since January 1, 2011. Which of the following **Cutter** insect repellents have you purchased?

(Select all that apply)

< Prev

Next >



4/8

Yes

No

Don't know / Not Sure

> >

You mentioned you have purchased **Cutter** brand personal insect repellent since January 1, 2011. Which of the following **Cutter** insect repellents have you purchased?

(Select all that apply)

< Prev

Next >



5/8

Yes

No

Don't know / Not Sure

> >

You mentioned you have purchased **Cutter** brand personal insect repellent since January 1, 2011. Which of the following **Cutter** insect repellents have you purchased?

(Select all that apply)

< Prev

Next >



6/8

Yes

No

Don't know / Not Sure

> >

You mentioned you have purchased **Cutter** brand personal insect repellent since January 1, 2011. Which of the following **Cutter** insect repellents have you purchased?

(Select all that apply)

< Prev

Next >



7/8

Yes

No

Don't know / Not Sure

> >

You mentioned you have purchased **Cutter** brand personal insect repellent since January 1, 2011. Which of the following **Cutter** insect repellents have you purchased?

(Select all that apply)

< Prev

Next >



8/8

Yes

No

Don't know / Not Sure

> >

You mentioned you have purchased **Cutter** brand personal insect repellent since January 1, 2011. Which of the following **Cutter** insect repellents have you purchased?

(Select all that apply)

< Prev

Next >

All done!
*Click the
"Continue"
button to
proceed.*

-/-

Since January 1, 2011, approximately how many times have you purchased **Cutter Natural** insect repellent?

(Select only one)

- ☐ Once
- ☐ Between 2 and 5 times
- ☐ More than 5 times
- ☐ Don't Know / Not sure

> >

When did you most recently purchase **Cutter Natural** insect repellent?

(Select only one)

- ☐ Within the last 3 months
- ☐ Between 3 and 6 months ago
- ☐ More than 6 months ago, but less than 1 year ago
- ☐ Between 1 and 2 years ago
- ☐ More than 2 years ago
- ☐ Don't Know / Not sure

> >

This question is a little different. While most people carefully read and respond to the questions in our surveys, a small number do not. To verify that you have read this question carefully, please select the **FOURTH** response from the list below.

Please select one

- ☐ Extremely Important
- ☐ Very Important
- ☐ Somewhat Important
- ☐ Not at all Important
- ☐ Don't know / Not sure

> >

Please think back to the **most recent time** you purchased **Cutter Natural** insect repellent. Why did you decide to purchase this particular product?

(Please type in your response)

> >

Any other reasons?

(Please type in your response)

> >

Please review the following list. Which of these, if any, are reasons for your most recent purchase of **Cutter Natural** insect repellent?

(Select all that apply)

- ☐ DEET-Free
- ☐ Recognize the brand name
- ☐ Previous experience with this product
- ☐ Size of container
- ☐ Repels mosquitoes the natural way
- ☐ No other products available at the time of my purchase
- ☐ Price of the product
- ☐ Ease of application
- ☐ Natural
- ☐ Scent/smell of the product
- ☐ Trust the brand
- ☐ Repels ticks
- ☐ Had a coupon / product on sale
- ☐ Not oily or greasy
- ☐ Satisfaction with previous purchase of this product
- ☐ Protection for the entire family
- ☐ The length of time it works
- ☐ Repels mosquitoes
- ☐ Other *(Please specify)*
- ☐ Don't know / Not Sure

We are now going to ask you questions about your experience using **Cutter Natural** insect repellent. When answering these questions, please think back to the most recent time you used **Cutter Natural** insect repellent.

> >

Was Cutter Natural Insect Repellent effective at repelling mosquitoes?

- ☐ Not at all effective at repelling mosquitoes
- ☐ Somewhat effective at repelling mosquitoes
- ☐ Extremely effective at repelling mosquitoes
- ☐ Don't know / Not sure

> >

How satisfied were you with Cutter Natural Insect Repellent?

- ☐ Very dissatisfied
- ☐ Dissatisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Satisfied
- ☐ Very satisfied
- ☐ Don't know / Not sure

> >

How long was Cutter Natural Insect Repellent effective at repelling mosquitoes?

- ☐ 2 hours or more
- ☐ More than 1 hour but less than 2 hours
- ☐ 30 minutes to 1 hour
- ☐ Less than 30 minutes
- ☐ Don't know / Not sure

> >

How often did you reapply Cutter Natural Insect Repellent?

- ☐ Once every three hours or longer
- ☐ Once every two hours
- ☐ Once every hour
- ☐ Two or more times every hour
- ☐ Don't know / Not sure

> >

Those are all the question we have for you. Thank you for participating in today's survey!

> >